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Complete if Known Substitute for form 1449/PTO Application Number Not Yot Known |0 740 <86 Filing Date INFORMATION DISCLOSURE Herewith First Named Inventor **David Bermudes** STATEMENT BY APPLICANT 1636 (Use as many sheets as necessary) Examiner Name Nancy Vogel

Sheet

Attorney Docket Number

| | - 46 | | | DOCUMENTS | |
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